



## TIPS FOR CARE PROVIDERS OF YOUNG CHILDREN (AGES 0-3) WHO ARE DEAF OR HARD OF HEARING (D/HH)

1. CHILDREN WHO ARE D/HH HAVE THE SAME NEEDS AS OTHER CHILDREN. This may be the most important thing care provider, family members, and friends need to know. They need the same love, attention and communication opportunities that hearing children need.
2. LEARN HOW TO PUT ON THE CHILD'S PERSONAL AMPLIFICATION (hearing aid(s), cochlear implant(s), bone anchored hearing system, Remote Microphone system). With a little instruction and practice, you will be able to put on the amplification quickly and easily. The time he/she spends with you will then be filled with sounds that he/she can learn to recognize. One or two hours a day of amplification use is not sufficient to provide the listening experience that a young child needs to learn to make sense out of sound. Keeping amplification on a young child who is D/HH is one of the most important things you can do for him/her.
3. LISTEN TO INFANTS. All infants have a lot to "tell" us, and infants who are D/HH are no exception. Listen to their gurgles, coos, and babbles with interest. Language acquisition is dependent on adults who positively encourage the child to talk, to label his/her world, and to respond to the speech of others.
4. PROVIDE MANY OPPORTUNITIES FOR LANGUAGE STIMULATION. Opportunities occur naturally each day. Talk to the child about what you are doing while cooking, taking a bath, playing with a toy, and cleaning up. Reading books together provides a wonderful opportunity for language stimulation.
5. INFANT BEHAVIORS IN RESPONSE TO LISTENING WITH AMPLIFICATION. Infants are most interested in voices and often enjoy toys that make noise. They may become quiet with their amplification on and may be louder when they are removed. They may engage in vocal play with amplification on, may turn toward the source of the sound. They sometimes quiet, still, or smile to voices and possible to toys that make noise. They may startle or cry to very loud sounds. You may notice an increase in the amount of time they attend to voices, music, and sounds.
6. BE AWARE THAT NOISE IS A PROBLEM. Hearing and understanding speech in background noise is one of the most difficult listening situations for someone who is D/HH. Typical problematic noises include: fans, blowers, and noisy play of other children in the room. Unfortunately, these sources of noise are often beyond your control. An awareness of how much difficulty they can cause will be beneficial for the child.
7. BE AWARE OF THE BENEFITS OF PERSONAL AMPLIFICATION. Children who use personal amplification may still miss important speech information and it does not restore normal hearing. Personal amplification will be most effective within an arm's length from the person talking.
8. WAIT FOR RESPONSES TO VERBAL STIMULI. It may take more time for children who are D/HH to process auditory information than it does for other children. This will depend in part on how much access to auditory information they have and the amount of time the child has used personal amplification.
9. PROVIDE REPETITION OF EXPERIENCES WITH ACCOMPANYING APPROPRIATE LANGUAGE. Children enjoy repeating pleasant experiences. Some concepts require repeated exposure before they are assimilated and even more repetition may be beneficial for the child who is D/HH.
10. BE AWARE OF THE BENEFITS OF VISUAL CUES IN COMMUNICATION.
  - Show enthusiasm. Keep your voice and facial expression interesting.
  - Be natural in your communication. Encourage the child to watch you when you speak. Smile and show approval when he looks at you while you are speaking.
  - If you are talking about an object or a toy you may try to hold it by your face so he/she can see your facial expression and add speechreading clues to what he/she hears.
  - Get down to the child's level so he can look at you easily. Talk near him so that he is most likely to hear you.

**MOST IMPORTANTLY, HAVE FUN AND ENJOY EACH OTHER EACH AND EVERYDAY!!!!**